

**Please complete the following application and submit it to:**

Cleanup Star Program  
NJDEP, Office of Brownfield Reuse  
PO Box 028  
Trenton, NJ 08625-0028

Applications must be received by Close of Business June 4, 2004

## **APPLICATION FOR PRE-QUALIFICATION AS A CLEANUP STAR**

**Please print or type, and complete every section.**

1. Full name: \_\_\_\_\_  
**Last First Middle**

2. Permanent residence address:

\_\_\_\_\_  
**Number/Street City State Zip**

3. Employer: \_\_\_\_\_

Employer address:

\_\_\_\_\_  
**Number/Street City State Zip**

4. Home Telephone: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

5. Email: \_\_\_\_\_ Fax: \_\_\_\_\_

6. Education:

<b>Name and Location of Institution</b>	<b>Attendance From To</b>		<b>Major Field of Study</b>	<b>Date of Graduation</b>	<b>Degree Received</b>

7. A Cleanup Star must hold at least one of the following certifications or licenses. Complete the following form to provide information on the certifications or licenses that you presently hold. For each certification or license that you indicate that you hold, attach a copy of the valid certification or license to your application.

Title of Certification	Certification/License Number	Issuing Organization	Date Issued
NJ Subsurface Evaluator			
Certified Hazardous Materials Manager			
Professional Engineer			
Professional Geologist			
Certified Ground Water Professional			
Certified Environmental Professional			
Qualified Environmental Professional			

8. Provide information and attach documentation of satisfactory completion of a generally recognized course on the NJDEP Technical Requirements for Site Remediation, N.J.A.C. 7:26E.

Course Location: \_\_\_\_\_ Instructor: \_\_\_\_\_ Date: \_\_\_\_\_

Organization offering course: \_\_\_\_\_

9. Provide information and attach documentation of satisfactory completion of annual Hazardous Waste Operations training pursuant to 40 CFR Part 300.

Course Location: \_\_\_\_\_ Instructor: \_\_\_\_\_ Date: \_\_\_\_\_

Organization offering course: \_\_\_\_\_

10. Provide information of required insurance coverage:

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Policyholder's Name: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Confirm that this policy provides the following coverage for the applicant:

- |   |  |
|---|--|
| <input type="checkbox"/> NJ General Liability                     | \$1,000,000 per occurrence/\$1,000,000 aggregate |
| <input type="checkbox"/> Professional Liability/Errors & Omission | \$1,000,000 per occurrence/\$1,000,000 aggregate |
| <input type="checkbox"/> Pollution/Property Damage                | \$1,000,000                                      |

Attach copies of the Certificate of Insurance that clearly state that the policy covers the types of insurance required above.

11. **Summarize** environmental professional full time employment experience beginning with most recent, and indicate whether the experience was acquired in New Jersey. Use **Experience Record Sheet** for complete description of employment history. Please note that Cleanup Stars must have a minimum of five (5) years of full time employment as environmental professionals working in the field of remediation of hazardous substances.

No.	No. of Months	Employer	Address
1.			
2.			
3.			
4.			
5.			
6.			

## EMPLOYMENT EXPERIENCE RECORD SHEET

Describe each employment experience in reverse chronological order, beginning with your present experience as an environmental professional. Summarize each, but provide sufficient information to document the detail of your responsibility, the levels of your competence, and the nature of the decisions you have been required to make as an environmental professional. **This form must be completed** and may be duplicated as necessary, to describe your complete experience record. Please note that Cleanup Stars must have a minimum of five (5) years of full time employment experience in the field of remediation of hazardous substances with a level of responsibility consistent with the level of responsibility expected by NJDEP to be exercised by Cleanup Stars.

1. Dates of employment \_\_\_\_\_  
From To Total months \_\_\_\_\_

Name of Employer \_\_\_\_\_ Telephone number \_\_\_\_\_

Address \_\_\_\_\_

Number/Street	City	State	Zip
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Exact title of position

Name of Supervisor \_\_\_\_\_ Telephone number \_\_\_\_\_

Detailed description of responsibilities:

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## EMPLOYMENT EXPERIENCE RECORD SHEET (cont.)

2. Dates of employment \_\_\_\_\_ **From** \_\_\_\_\_ **To** \_\_\_\_\_ Total months \_\_\_\_\_

Name of Employer \_\_\_\_\_ Telephone number \_\_\_\_\_

Address \_\_\_\_\_  
**Number/Street** **City** **State** **Zip**

Exact title of position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Telephone number \_\_\_\_\_

Description of responsibilities:

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3. Dates of employment \_\_\_\_\_ **From** \_\_\_\_\_ **To** \_\_\_\_\_ Total months \_\_\_\_\_

Name of Employer \_\_\_\_\_ Telephone number \_\_\_\_\_

Address \_\_\_\_\_  
**Number/Street** **City** **State** **Zip**

Exact title of position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Telephone number \_\_\_\_\_

Description of responsibilities:

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*(Duplicate this page as necessary to document employment experience.)*

## NEW JERSEY PROJECTS RECORD SHEET

Cleanup Stars must have a minimum of five (5) years of continuous remediation experience in New Jersey. For each of the five years prior to the application date the applicant must submit a list of Remedial Investigation and/or Remedial Action projects, including all relevant NJDEP case numbers and dates of participation, conducted under NJDEP oversight in which they personally and significantly participated. For each referenced project the applicant must provide a brief description of the specific activities they conducted with respect to the project and the application of the Technical Requirements to the project. Qualifying experience must be of a level of responsibility consistent with the responsibility to be exercised by Cleanup Stars. The applicant must submit project descriptions demonstrating New Jersey experience on a substantially continuous basis for all or substantially all of the sixty months prior to the date of application.

1. Site Name \_\_\_\_\_ NJDEP Case Number \_\_\_\_\_

Address \_\_\_\_\_

**Number/Street**

**City**

**County**

NJDEP Case Manager: \_\_\_\_\_ Bureau/Office: \_\_\_\_\_

AOC Name: \_\_\_\_\_ Remedial Phases: \_\_\_\_\_

Activity Duration \_\_\_\_\_

**From**

**To**

Working Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Description of responsibilities:

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## NEW JERSEY PROJECTS RECORD SHEET (cont.)

2. Site Name \_\_\_\_\_ NJDEP Case Number \_\_\_\_\_

Address \_\_\_\_\_  
**Number/Street** **City** **County**

NJDEP Case Manager: \_\_\_\_\_ Bureau/Office: \_\_\_\_\_

AOC Name: \_\_\_\_\_ Remedial Phases: \_\_\_\_\_

Activity Duration \_\_\_\_\_  
**From** **To**

Working Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Description of responsibilities:

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3. Site Name \_\_\_\_\_ NJDEP Case Number \_\_\_\_\_

Address \_\_\_\_\_  
**Number/Street** **City** **County**

NJDEP Case Manager: \_\_\_\_\_ Bureau/Office: \_\_\_\_\_

AOC Name: \_\_\_\_\_ Remedial Phases: \_\_\_\_\_

Activity Duration \_\_\_\_\_  
**From** **To**

Working Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Description of responsibilities:

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*(Duplicate this page as necessary to document New Jersey projects experience.)*

## STATEMENT REGARDING CHARACTER

12. Have you ever had any professional license, registration, or certification suspended or revoked? ☐ Yes ☐ No

13. Have you ever been indicted for, convicted of, or plead guilty to an environmental crime or offense, or any related criminal offense? ☐ Yes ☐ No

If yes to either or both of the above questions, specifically describe below, including the date of indictment, conviction or plea.

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14. The Department will post a list of pre-qualified Cleanup Stars on its website. Check here if you do **NOT** want the Department to include your **employer contact** information on its website for the benefit of parties seeking to retain a Cleanup Star: ☐ PLEASE NOTE that NJDEP will publish the names of ALL Cleanup Stars on its Web page, even if contact information is not included.

15. By applying to become a Cleanup Star, I agree to execute NJDEP Cleanup Star Oversight Agreements (“CSOAs”) when engaged to perform site remediation activities under the Cleanup Star Program.

## Applicant's Certification

State of New Jersey

County of \_\_\_\_\_

In affixing my signature to this application, I \_\_\_\_\_ hereby aver that all statements made herein and on any appended sheets are true and correct, and further, and that any untrue or incorrect statement made by me in this application, shall be sufficient grounds for suspension or revocation of certification as may be determined by the NJDEP Cleanup Star Program. Furthermore, I hereby acknowledge that I have read and fully understand the terms and conditions of the Cleanup Star Program, and that I accept these terms.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Type or Print) \_\_\_\_\_

Before me, the undersigned authority on this day \_\_\_\_\_ personally appeared, known to me to be the person whose name is subscribed to the following instrument and acknowledged to me that he/she executed the same as a warranty of the statements therein contained, of his/her own free will and volition, and subject to the penalties of perjury.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public \_\_\_\_\_

## Employer Authorization Affidavit

I hereby acknowledge that I have the authority to bind applicant's employer and that have read and fully understand the terms and conditions of the Cleanup Star Program. In affixing the signature below to this application, the applicant's employer hereby authorizes the applicant to apply for participation in the Cleanup Star Program and, if accepted, to participate in the Cleanup Star Program as an employee of this organization. In addition, the applicant's employer certifies, to the best of its knowledge, that the applicant's statements made herein and on any appended sheets are true and correct. Furthermore, the applicant's employer certifies that it has not been indicted for, convicted of, or plead guilty to an environmental crime or offense, or any related criminal offense.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Type or Print) \_\_\_\_\_

Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Before me, the undersigned authority on this day \_\_\_\_\_ personally appeared, known to me to be the person whose name is subscribed to the following instrument and acknowledged to me that he/she executed the same as a warranty of the statements therein contained, of his/her own free will and volition, and subject to the penalties of perjury.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public \_\_\_\_\_